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Special Report: Health Care

Patients' Bill of Rights

In a hearing last spring on the need for a state Patients' Bill of Rights, a son who recently lost his mother to cancer said it was wrong his mom had to fight her disease and her HMO too.

Could a timely referral to a cancer specialist, which the insurer denied, have saved his mother? Could the stem-cell

transplant she was later denied have saved her? No one can be certain. But I certainly agree with the son's appeal to our Legislature to quickly enact a Patients' Bill of Rights and "not let the people of Washington down the way my mother's managed care company let her down."

The growing number of painful stories like this—and growing threats to the privacy of personal medical records—recently led nearly every Democrat in our state House of Representatives to unite on the goal of enacting a Patients' Bill of Rights when the Legislature meets again in January.

As I write this, the patient protections we're developing include:

- The right to appeal insurer denials of health care coverage including denied procedures and referrals to specialists — to an independent review panel.
- The right to full and clear disclosure of health plan benefits and limitations.
- The right to protect the privacy of personal health care information
- The right to full disclosure by your doctor of all treatment options
- The right to sue for damages resulting from unfair decisions.

We tried to enact a similar measure, but without the right to sue, last January. It failed in large part because some people were concerned about the cost. Since then, however, a Congressional Budget Office study has found that all of these protections — including the right to sue — would add *less than \$2.50 per month to the cost of typical health care coverage for an entire family.*

This is a very small price to pay for protecting the health care rights of patients, so I believe we can make good progress on the Patients' Bill of Rights next year. I'd like to hear your views. Your insights and experiences could help us enact a strong Patients' Bill of Rights for Washington's families.

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Finding Individual Insurance

You've probably already heard that in the past year all of our state's major private health insurers have stopped accepting *new* applications for individual health insurance policies. In deciding how this might affect you or

your family, it is important to understand that:

- People currently covered by individual health insurance through Premera Blue Cross, Regence Blue Shield and Group Health Cooperative will continue to be covered if they stay current on premium payments— the insurers' actions apply only to applications for new individual policies.
- The number of affected people is really quite small. Individual policies make up only about 5 percent of the overall health insurance market, as the vast majority of our population receives health coverage through their employers.

What if you *are* affected?

You still have options. Since everyone's circumstances and needs differ, I recommend you look through the new table of health coverage options prepared by our Insurance Commissioner. You can get this free table, which includes eligibility, covered benefits, costs and other important information, through the Insurance Commissioner's Consumer Hot Line (1-800-562-6900) or web site (www.wa.gov/ins).

Despite these remaining options, the Legislature clearly has a duty to work with insurers to restore competition and broad access to private individual health insurance. The causes of the current problems are complex, and finding solutions will be challenging. But we are working hard to find answers, and I'm hopeful that we will resolve the problem during the next legislative session.

America's healthiest city

"Seattle is the healthiest city in America" was the headline that announced the results of a new ABC News study of health in American cities. I think this proud accomplishment helps to put our remaining health care issues in perspective. Thanks to good public policies and healthy personal lifestyles, Seattle was unbeaten and untied in terms of health among all large cities in the nation.

Among other pluses, the ABC study found that "if you live in Seattle you'll probably live longer," as our average life span is 79 years—a full 15 years longer than the bottom-ranked city (New Orleans). The survey also found that mortality from heart disease in Seattle is 20 percent below the national average, and our teen-pregnancy rates are only half the national average.

New Care Concepts and Moms on the Move (see p. 4) are two great examples of Seattle's leadership in health.

Nine-year-old Seattle student Arthur Sawe earned my two-thumbs up for his speech on video-game violence in the Rose Garden of the White House. I'm proud that President Clinton recognized my efforts to inform parents about the risks of violent video-games.



Special Report: HEALTH CARE

America's kid-friendliest city

Still more proud news: our #1 ranking in ABC's health study came only a week after the well-known national organization Zero Population Growth honored Seattle as the "Kid-friendliest" major city in America. In fact, we are the only large American city to earn an overall "A+" in the seventh biennial Kid-Friendly Cities Report Card. This honor not only reflected an A+ in children's health for low infant mortality, low teen births and healthy birth-weights, but also an A+ in education, particularly for low dropout rates and high pre-school participation.

As an optimist, I believe there is always room to make our state and city even greater. But it is also important to appreciate how far we and our parents and grandparents have come toward building the city of our hopes and dreams. Congratulations, Seattle.

Let's change a foolish rule

We have an opportunity to protect infants and help parents bond with their newborns while saving state taxpayers \$13 million. Will we do it? Common sense says 'yes,' but recent experience says 'maybe not.'

Because of legislative inaction last session, a new welfare rule took effect July 1st that requires mothers to be at work within 90 days of giving birth. Gov. Gary Locke and many others, including me, tried to expand the three month requirement to one year. Unfortunately, our efforts were blocked.

Changing this ill-conceived rule remains a personal priority for many reasons, including the research which shows that early parental bonding is vital to child development. But there is also the practical reason that we simply don't have sufficient child care to ensure the safety of infants whose mothers are forced back to work too soon.

An estimated 78,000 infants and only 1,874 licensed child-care openings statewide makes the three-month rule a recipe for danger. As one child-care worker put it, the lack of licensed care means that affected mothers are leaving infants with boyfriends and others "I wouldn't trust my car with." A state child care facilities inspector warned shortly after the rule took effect that illegal child-care facilities are already springing up — including centers run by drug addicts, and some that are polluted by toxic materials.

We have much to do to make child care available to *all* working moms who need it. In the meantime, we can at least change a rule that both compounds the shortage and makes it more dangerous for babies.

A great local success

Did you know we're home to a national leader in medically-intensive home care? Whenever policy-makers discuss improving in-home care, the achievements of New Care Concepts are almost always highlighted. People who would otherwise be institutionalized due to acute medical needs are now thriving in their own homes thanks to New Care Concepts, whose clients, administrators and care workers are truly inspiring. They are proving daily, as one of their publications puts it, that "It is hope, above all, which gives us the strength to live and continually try new things." To learn more about New Care Concepts' pioneering work, you can call 789-9054. We're lucky to have them in Ballard.

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Moms on the Move

If you want a model of how to help mom's with child-care needs stay healthy, look to the Ballard Family Center. The center's Moms on the Move program is showing how fitness classes can be coordinated with the child-care needs of pre-natal and post-partum moms. By offering child care with their Monday, Wednesday and Friday day-classes, the Ballard Family Center and Swedish Hospital are creating opportunities for better fitness that would otherwise be unavailable.



Tuesday and Thursday evening classes are also available, but without child care. New moms can register by calling Swedish Hospital at 386-3030, extension 35563.

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